UNITED STATES DISTRICT COURT

DISTRICT OF OREGON

O.M., by/throug	gh guardian K.C. Moultrie	Case No.: 3:21-cv-00683-IM					
	Plaintiff(s),						
v.		MOTION FOR LEAVE TO APPEAR PRO HAC VICE					
National Wome	en's Soccer League, LLC						
	Defendant(s).						
Attorn	ey Michelle J. Looby	requests speci	al admission <i>j</i>	oro hac			
vice to the Bar	of the United States District Cou	ort for the District of Oreg	on in the abov	ve-			
captioned case	e for the purposes of representing	the following party (or pa	arties):				
Plaintiff O.M., b	by and through her parent and guard	ian, K.C. Moultrie					
In supp	port of this application, I certify the	nat: 1) I am an active men	mber in good	standing			
with the MN	State Bar; and 2) that	I have read and am famili	ar with the Fe	ederal			
Rules of Evide	ence, the Federal Rules of Civil a	nd Criminal Procedure, th	e Local Rules	of this			
Court, and this	s Court's Statement of Professiona	alism.					
I under	rstand that my admission to the B	ar of the United States Di	strict Court fo	or the			
District of Ore	egon is solely for the purpose of li	itigating in the above matt	ter and will be	;			
terminated upo	on the conclusion of the matter.						
(1)	PERSONAL DATA:						
	Name: Looby	Michelle	J.				
	(Last Name)	(First Name)	(MI)	(Suffix)			
	Agency/firm affiliation: Gustaf	son Gluek PLLC					
	Mailing address: 120 South Sixth Street, Suite 2600						
	City: Minneapolis	State: MN	Zip:	55402			
	Phone number: (612) 333-8844	Fax numbe	er: (612) 339-	6622			
	Business e-mail address: mloob	v@gustafsongluek.com					

U.S. District Court – Oregon [Rev. 11/2019]

(2)	BAR ADMISSION INFORMATION:					
	(a)	State bar admission(s), date(s) of admission, and bar number(s): Minnesota Bar No. 0388166, admitted 10/26/2007				
	(b)	Other federal court admission(s) and date(s) of admission: USDC Minnesota admitted 7/17/2008; USDC North Dakota admitted 5/1/2012				
(3)	CERT	TIFICATION OF DISCIPLINARY ACTIONS:				
	I am not now, nor have I ever been, subject to any disciplinary action by any state or federal bar association or subject to judicial sanctions.					
	I am now or have been subject to disciplinary action by a state or federal bar association or subject to judicial sanctions. (Attach letter of explanation.)					
(4)	CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE: Pursuant to LR 83-3, I have professional liability insurance, or financial responsibility equivalent to liability insurance, that meets the insurance requirements of the Oregon State Bar for attorneys practicing in this District, and that will apply and remain in force for the duration of the case, including any appeal proceedings.					
(5)	CM/ECF REGISTRATION: I acknowledge that I will become a registered user of the Court's case management and electronic case filing system (CM/ECF) upon approval of this application, and I consent to electronic service pursuant to Fed. R. Civ. P. 5(b)(2)(E) and the Local Rules of the District of Oregon.					
		rney Seeking <i>Pro Hac Vice</i> Admission: I have read and understand the 4-3, and I certify that the above information is true and correct.				
DATEI): <u>05/10</u>	/2021				
		/s/ Michelle J. Looby (Signature)				

U.S. District Court – Oregon [Rev. 11/2019]

REQUIREMENT TO ASSOCIATE WITH LOCAL COUNSEL:

LR 83-3(a)(1) requires applicants for *pro hac vice* admission to associate with local counsel, unless requesting a waiver of the requirement under LR 45-1.

To request a wai following box:	ver of the requirement	to associate with local	counsel under LR 45	-1, check the			
Court did	l not issue. Pursuant to	purpose of filing a moon LR 45-1(b), I request ocal counsel and therefolication.	a waiver of the LR 83	3-3(a)(1)			
To associate with local counsel, provide the following information about local counsel, and obtain the signature of local counsel.							
Name:	Sasaki	Joshua	M.				
1000 5700 0100-200	(Last Name)	(First Name)	(MI)	(Suffix)			
OSB number: 96	64182	100					
Agency/firm affiliation: Miller Nash Graham & Dunn LLP							
Mailing address: 111 SW 5th Avenue, Suite 3400							
City: Portland		State: OR	Zip:	97204			
Phone number: (503) 205-2410	Fax number: <u>(5</u>	03) 224-0155				
Business e-mail address: josh.sasaki@millernash.com							
CERTIFICATI	ON OF ASSOCIATE	LOCAL COUNSEL	:				
I certify that I am a member in good standing of the bar of this Court, that I have read and understand the requirements of LR 83-3, and that I will serve as designated local counsel in case number 3:21-cv-00683-IM							
DATED: 05/07/2	2021	(Signature of Local	ml				

U.S. District Court – Oregon [Rev. 11/2019]